solution has no effect on the temperature, while physiological salt solution practically always causes an elevation. (2) Injection of 20 c.c. paraffin suspension with a content of 0.01 to 0.1 per cent. of paraffin and 2000 to 11,000 particles of paraffin per 1 c.mm. regularly leads to elevation of temperature of ½ to 1° C. and more. (3) Injections of electrargol and electroplatinol produce fever. (4) Injection of Ringer's solution with 0.1 to 0.3 mg. arsenic per kilo of weight (rabbit) is followed by a rise in temperature. Fifty times this dose causes an immediate fall. (5). The fever following the injection of fine suspensions of paraffin, silver, and platinum may be due to a mechanical irritation of the sympathetic nerve endings in the vessel walls or to the action of products of metabolism of the leukocytes, which are formed as a response to the introduction of the foreign material.

Experimental Digestive Leukocytosis.—M. BRASCH (*Zeitschr. f. exp. Path. u. Therap.*, 1912, x, 381) approaches the question of digestive leukocytosis, about which there has never been unanimity, from the experimental side. He records numerous experiments on rabbits and dogs and finds that a digestive leukocytosis follows the taking of food during hunger practically without exception. The kind of food seems to be of minor importance, as it was observed to occur after giving nucleic acid, protein, fat, and carbohydrate. The leukocytosis appears within four to ten hours after the food is given. In rabbits it is generally the small lymphocytes which are particularly increased, though at times there is a uniform increase in all varieties of leukocyte. In the dog, on the other hand, the latter condition is found, or there is a leukocytosis due to increase of neutrophilic polynuclear cells. The digestive leukocytosis is not to be considered as a protective reaction of the organism, such as one observes after injection of foreign matters into the body.

Paroxysmal Ventricular Tachysystole of Psychic Origin.—K. KURE (*Deutsch. Arch. f. klin. Med.*, 1912, cvi, 33) reports the study of an eleven year old girl with tachycardia due to ventricular extra-systoles. The attacks were brought on by psychic irritation. Analysis of simultaneous tracings of veins, artery, and heart apex demontrated the fact that the condition was essentially a ventricular tachysystole which was quite independent of auricular rhythm. Whether in this case the ventricular tachsystole was due to heterotopic native impulses in the ventricles or whether it arose through an increase of the irritability (Anspruchsfähigkeit) of a certain part of the ventricle is not clear. It is, nevertheless, highly probable that in this cases the extrasystoles are attributable to stimulation of the accelerans. As a result of the ventricular tachysystole, a complete dissociation was produced temporarily. Kuré suggests that a part of the cases of paroxysmal tachycardia are due to ventricular extrasystoles. [An observation which has been made by many students.—W. S. T.]

The Chemistry of Tuberculous Sputa.—R. EISELT (*Zeitschr. f. klin. Med.*, 1912, lxxv, 71) has studied tuberculous sputa particularly with reference to their enzymatic activities. The methods of examination are described in detail. He finds that the proteolytic enzyme usually present in tuberculous sputa is a tryptase, but it is by no means so constantly present as has been supposed heretofore. Frequently tryptase alternates with antitryptase in the sputum. Usually this is the case during febrile periods. Like pancreatic trypsin, the tryptase of the sputum, activated with calcium salts, has plastein-forming activity, which is retained in the presence of antitryptase. Lipolytic enzymes were not demonstrable. The proteolytic activity varies inversely with the coagulable protein of the sputum and directly with the quantity of albumoses and amino-acids. Chemical examination of tuberculous sputa showed that of all inflammatory lung diseases tuberculosis is associated with the highest values for coagulable protein. Albumoses are also more abundant than in other diseases. Peptones, on the other hand, are present only in traces; it is probable that they are absorbed almost as rapidly as formed. Of other nitrogenous bodies, the large quantity of incoagulable nitrogen (Rest-N) is striking. It is chiefly in the form of glycosamine and amino-acids.

Adrenalin in Pathological Sera.—STEWART (*Jour. Exper. Med.*, 1912, xv, 547) attempted to demonstrate adrenalin in the sera of blood obtained by venesection from 14 patients suffering with different maladies among which were malignant Graves' disease, myxedema, chronic nephritis, arteriosclerosis, angina pectoris, syphilis, general paresis, gout, and pneumonia. For detection of adrenalin in blood serum Stewart suspended rabbit intestinal and uterine segments in Ringer's solution and measured the increase in the size of the beats and the degree of muscle tone when the medium was replaced by the serum in question. No one of the pathological sera yielded evidence of the presence of adrenalin. This result is explained by Stewart's experimental work. Serum from the adrenal veins of the dog collected with the least possible disturbance gave a negative reaction. Whereas in serum collected during mechanical stimulation of the gland the reaction was distinctly positive. Stimulation of the splanchnics changed a negative reaction to positive in serum of blood from the inferior vena cava, draining the adrenal and lumbar veins. The general admixed blood of the inferior vena cava and elsewhere more distant in the general circulation failed to show the presence of adrenalin whether the splanchnics were stimulated or not. The cause of the negative result is without doubt the high degree of dilution in the inferior vena cava of the blood coming from the adrenals, greater than a dilution of 1 to 1,000,000 as measured by this method.

Malarial Pigment and the Malarial Paroxysm.—BROWN has shown that the pigment elaborated from the hemoglobin of the red blood corpuscle by the malarial parasite and liberated into the circulation of the host at the time of segmentation of the parasite is undoubtedly hematin. In his work upon hematin metobolism he noted that a rabbit receiving an intravenous injection of this pigment developed a very pronounced shaking chill strikingly like that of malaria. With the hope of finding in this substance one of the hypothetical toxins operative in malaria Brown (*Jour. Exper. Med.*, 1912, xv, 579) undertook a series of ninty observations upon the effect of the intravenous injection of alkaline hematin in rabbits. The hematin used was derived